BEST AVAILABLE COPT										
	PATENT A		ON PEE DET	Application or Docket Number						
Effective December 29, 1999 09/625662										
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA					RATE	FEE		RATE	FEE	
BA	SIC FEE							ОЯ		840
TO	TAL CLAIMS		(minus 20=		•			ОЯ	X\$18=	
INDEPENDENT CLAIMS		AIMS (minus 3 =	= 1		X39=		ОЯ	X78=	73
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=	, -
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	918
CLAIMS AS AMENDED - PART II									OTHER	THAN
10	19-05	(Column 1)	1	(Column 2)	(Column 3)	SMALL		OR	SMALL	
MENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 8	Minus •	20	= -	X\$ 9=		OR	X\$18=	
AME	Independent	• 4	Minus .	··· 84	-	X39=		OR	X78=	
Н	FIRST PHESE	NIAION OF M	ULTIPLE DEPEN	VDENT CLAIM		+130=		OR	+260=	
1. Za 4.4						TOTAL ADDIT. FEE		00	TOTAL ADDIT, FEE	
4	- 70-04	A0011.1 EE (•	NDU17.1 EQ.					
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	. 6	Minus •	20	= /	X\$ 9=		OR	X\$18=	
AMEND	Independent	AUTATION OF N	Minus (NDENT CLAIM	= /	X39=		OR	X78=	
\vdash	· ·		Vern et bet a	·		+130=		OR	+260=	
	1 in Al	P			•	TOTAL ADDIT, FEE		OR	YOTAL ADDIT, FEE	
L	1-19-07	(Column 1)		(Column 2)	(Column 3)	•				
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 6	-	. 20	= /	X\$ 9=		OR	X\$18=	
AME	Independent	· D	<u> </u>	NDENT OF AIR	= /	X39=	_	OR	X78=	
\vdash	FIRST PRESE	INTATION OF M	NULTIPLE DEPE	NUENT GLAIM	<u> </u>	+130=		OR	+260=	
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL ADDIT, FEE	
"	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***ADDIT. FEE									

FORM PTO-875 (Rev. 12/99)